

CAMPAIGN FINANCIAL DISCLOSURE STATEMENT

For State and Local Candidates **For Single-Candidate Committees**

	E OF REPORT	The second of th	andidateoro	Cofha	4.[
	COMMITTEE. NAME OF CANDIDATE	100	er r	COPHR	3. ELECTION DATE	
2.D. IF (COMMITTEE, NAME OF CANDIDATE				11-4-1	
	MPAIGN ADDRESS AND PHONE eet or Rural Route	City		State	Zip Code	Phone
Stre	NDIDATE'S HOME ADDRESS (if difference or Rural Route 75 Dallas Hollow	City	le Daisy	State	Zip Code 37379	Phone 403- 718-1735
5. OF	FICE SOUGHT (include district number,		6. NAME	OF POLITICAL	TREASURER (may be	candidate)
7, CA	TEGORY OR REPORT (Check one)	FOURTH	PRE-	D PRE-	MID-YEAR	
QU	ARTER QUARTER QUARTER GINNING DATE OF REPORTING PERIOD		PRIMARY	GENERAL	SUPPLEMENTAL ORTING PERIOD	YEAR-END SUPPLEMENTAL
9. (Chec	1 Jul 2014		30 5	Sep 20.	14	
a.	This campaign is exempt from detail tures total \$1,000 or less for this rep	ed disclosure becau orting period. (Com	se contributions plete items 12d	(including in- ., 12e. and 12	kind) received total \$1,0	000 or less AND expendi-
b.	This campaign is required to file a de and/or expenditures total more than			contributions	(including in-kind) receiv	ved total more than \$1,000
10. I/we do solemnly swear or affirm that the information contained in this campaign financial disclosure report is true and that this report is an accurate accounting of campaign contributions and expenditures required to be reported by the candidate committee by the Campaign Financial Disclosure Act. Additionally, I/we swear or affirm that no campaign contributions have been expended for the personal financial benefit of the candidate or for any other nonpolitical purpose as defined by the federal internal revenue code.						
	signature of candidate	date		signature	of political treasurer	date
11. WI	Ame V. Lang	10-3-	14 _	Day	le Penny	10/3/14
	signature of withess	date		sign	nature of witness	date
12. SU	MMARY				Ø	
a.	BALANCE ON HAND LAST REPORT	***************************************			s	875.00
b.	TOTAL RECEIPTS THIS PERIOD		. /	/\	s 1086, t	
C.	TOTAL DISBURSEMENTS THIS PERIOD	Circludes	IN-Ki	Nd)	s 1086, t	recorder to a state of
d.	BALANCE ON HAND (12.a. plus 12.b.	minus 12.c.)				s 72.87
e.	TOTAL LOANS OUTSTANDING			£- 130 h	107	s
f.	TOTAL OBLIGATIONS OUTSTANDING	N	OMMISSION PH S: 36	S-TJOA	113	. \$
Side		1.5	COUNTY	MOTIMA	11	



SUMMARY PAGE - CANDIDATE

13. NAME OF CANDIDATE OR COMMITTEE (In Full)	14. REPORT COVERING THE PERIOD					
	FROM: 1506 TO: 30 Sep					
RECEIPTS 15. CONTRIBUTIONS (other than loans and interest)						
a. Unitemized Contributions (\$100 or less from each source this period)\$						
b. Itemized Contributions (over \$100 from each source this period)	b. Itemized Contributions (over \$100 from each source this period)\$ 1086.14					
c. TOTAL CONTRIBUTIONS (other than loans and interest)(add 15.a. and 15.b.)	\$ <u>/086.14</u>					
16. LOANS RECEIVED THIS REPORTING PERIOD	\$ <u></u>					
17. INTEREST RECEIVED THIS REPORTING PERIOD	s					
18. TOTAL RECEIPTS (add 15.c., 16., and 17.) (must be shown in item 12.b.)	\$ 1086.74					
DISBURSEMENTS						
19. EXPENDITURES (other than loan payments)						
a. Expenditures (\$100 or less each payee this period) (must be listed by category - e.	g., printing, postage, gasoline)					
Opening cheding Acct \$ 227	5					
Copy CONNection \$ 80.89	/_					
STR Advertisin T- Shinks \$ 217.4	<u>/_</u>					
PAUL'S AULO VARD SIGNS \$ 481.	<i>13</i>					
4 impaint Emeny Boards \$ 284.0	0/					
\$						
\$						
\$						
\$						
Total of Expenditures (\$100 or less each payee)						
b. Itemized Expenditures (Over \$100 each payee this period)	s 782. 55					
c. TOTAL EXPENDITURES (other than loan repayments)(add 19.a. and 19.b.)	\$_ Ø					
20. LOAN REPAYMENTS MADE THIS PERIOD	\$_ <u>Ø</u>					
21. TOTAL DISBURSEMENTS (add 19.c. and 20.) (must be shown in item 12.c.)						
22.IN-KIND CONTRIBUTIONS						
a. Unitemized in-kind contributions (\$100 or less from each source this period)\$						
b. Itemized in-kind contributions (over \$100 from each source this period)\$						
c. TOTAL IN-KIND CONTRIBUTIONS RECEIVED THIS PERIOD (add 22.a. and 22.b.)\$						
23. OBLIGATIONS						
a. Unitemized Obligations Outstanding (\$100 or less each)\$						
b. Itemized Obligations Outstanding (Over \$100 each)\$						
c. TOTAL OBLIGATIONS OUTSTANDING (add 23.a. and 23.b.) (must be shown i item 12.f.)\$						

SS-1133 (Rev. 4/02)

Page _____ of ____

ITEMIZED STATEMENT OF CONTRIBUTIONS - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE		/1		REPORT COVER	ING THE PERIOD
Walter "Robert"	Cot	HRAN	FF	ROM: Jul	TO: 30 Sept
3. TOTAL ITEMIZED CAMPAIGN CONTRIBUTIONS FROM PRECEDING PAGE (enter \$0 if first itemize					Amount
4. COMPLETE THE APPROPRIATE ITEMS FOR EA				from any contributor)	
First Name	Middle Name	1	Contribution Received For:		Amount of Contribution
WAGNE	Hou	NANA			
Last Name/Oglanization Name Mailliand			Primary Election G	eneral Election	B
Arirines	Suc	DR	Runoff (Local Elections On	nly)	# 100
Chy Sall Dais	State	Zp Code 37379	Date of Contribution		Aggregate This Election
Occupation	110	3/3//	23 506 14		
Relined					
Employer					
First Name	Middle Name	9 /	Contribution Received For:		Amount of Contribution
Lact Name Comparization Name	Ro	bert	Primary Election	Seneral Election	1200-
CoPhann		A			1 200
10175 DALLAS HO			Runoff (Local Elections C	Only)	
50 dd - Daise	Zp Code 37375	Date of Contribution		Aggregate This Election	
Occupation /	State	3/3/3	23 201	19	1400 00
ReLined		20 Aug	14	7	
Employer			00 10 0		
First Name	Middle Name	е	Contribution Received For.		Amount of Contribution
Steve Last Name Omanization Name			☐ Primary Election 📝	General Election	100
T3 Row N			Trimary Decarding	Scrietal Electron	7
Address			Runoff (Local Elections C	Only)	
City	State	Zip Code	Date of Contribution		Aggregate This Election
Occupation			8-2-14		
Consuperation 1		0-0-1/		10000	
Employer				100	
First Name	Middle Nam	ne.	Contribution Received For:	/	Amount of Contribution
Last Name/Organization Name			☐ Primary Election ☐	General Election	1 -
Jack Address HUND/ex		Runoff (Local Elections (Only)	1/00 -	
City HUNDLE	State	Zip Code	Date of Contribution		Aggregate This Election
		25.500			riggrayate iilis Election
Occupation			8-4-14		
Employer			-		100
					,
5. TOTAL ITEMIZED CONTRIBUTIONS					
(Carry forward to item 3. of next page if additional page					
(If this is the last page of contributions, this amount must					

ITEMIZED STATEMENT OF IN-KIND CONTRIBUTIONS - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE	111	Callagy		REPORT COVER	TO 3 o Sep	
3. TOTAL ITEMIZED IN-KIND CONTRIBUTIONS FROM PRECEDING PAGE (enter \$0 if first ite				1300	Amount	
		(enter \$0 if first itemized page) UTION (in-kind contributions totaling more than \$100 from any contributor during the period)				
First Name WANDA	Middle Nan	ARE THE LOW AND A SECOND	In-Kind Contribution Received Fo	Ç.	Value of In-Kind Contribution	
Last Name/Organization Name Coffian N			Primary Election General Election Runoff (Local Elections Only)		284.01	
	1016	and.	Date of In-Kind Contribution 7-3/-/4		Aggregate this Election 28 4.0/	
City Sodly - Daiss	dress 10175 DALLAS Hollow Rd.		Description of In-Kind Contribution			
Occupation Jampioyer Resince			1500 Emery BOARDS			
First Name	Middle Nan	ne	In-Kind Contribution Received For: Primary Election General Election		Value of In-Kind Contribution	
Last Name/Organization Name	Last Name/Organization Name			☐ Primary Election ☐ General Election ☐ Runoff (Local Elections Only)		
Address			Date of In-Kind Contribution	• • • • • • • • • • • • • • • • • • • •	Aggregate this Election	
City State Zip Code			Description of In-Kind Contribution			
Occupation Employer						
First Name .	Middle Nan	ne	In-Kind Contribution Received Fo	Y	Value of In-Kind Contribution	
Last Name/Organization Name				General Election	your or mining continuous	
			Runoff (Local Elections O	Only)		
Address			Date of In-Kind Contribution Aggregate this Election			
City	State	Zip Code	Description of In-Kind Contribution			
Occupation Employer						
First Name	First Name Middle Name			X.	Value of In-Kind Contribution	
Last Name/Organization Name	1		Primary Election G	General Election		
Address			Date of In-Kind Contribution	only)	Aggregate this Election	
City	State	Zip Code	Description of In-Kind Contribution			
Occupation Employer						
First Name	Treasure N		L. Vi. d. C. and L. and L. C. and L. and L. C. and L. and L. C. and L. and L. C. and L			
First Name Middle Name Last Name/Organization Name		In-Kind Contribution Received F		Value of In-Kind Contribution		
Casc nernescrigarizzadon nerne			Runoff (Local Elections O	nly)		
Address			Date of In-Kind Contribution		Aggregate this Election	
City	State	Zip Code	Description of In-Kind Contribution			
Occupation Employer						
TOTAL ITEMIZED IN-KIND CONTRIBUTIO (Carry forward to item 3, of next page if additional pages (If this is the last page of in-kind contributions, this amounts (Rev. 2008)	of this form a)			

ITEMIZED STATEMENT OF EXPENDITURES - CANDIDATE

NAME OF CANDIDATE OR COMMITTEE	[" C.]]	2. REPORT COVER				
walter "Roben	F GMRAN	FROM: 1 JUL	TO: 30 Sep			
3. TOTAL ITEMIZED CAMPAIGN EXPENDITU	Ø					
4. COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED EXPENDITURE (expenditures totaling more than \$100 to any payee during the period)						
First Name	Middle Name	Purpose of Expenditure	Amount of Expenditure			
Last Name/Business Name Tend. Valley Cres	let UNION	Checks Chia	22.75			
Address		openia cary	*			
Sold, DAISS	State Zip Code 3737 9	Purpose of Expenditure Checks Opening Chin Acch				
First Name	Middle Name	Purpose of Expenditure	Amount of Expenditure			
Last Name/Business Name Copy Connection Address 4830 My 58	she 124	Business CANDS	80.84			
Chaltanoos A	State Zip Code 37416					
First Name	Middle Name	Purpose of Expenditure	Amount of Expenditure			
Last Name/Business Name S+K Adverage Sign Address		T- Shinks	421741			
City Maple ST	State Zip Code		. 0//			
Soly Daiss	PN 37379					
First Name	Middle Name	Purpose of Expenditure	Amount of Expenditure			
Last Name/Business Name PAUL'S ANGO		Double-Siled Yard Signs	4			
Address 8352 Dyton	PK.	YARD SOCNS	148/3			
Sold Diss	State Zip Code 37379		70.			
First Name	Middle Name	Purpose of Expenditure	Amount of Expenditure			
Last Name/Business Name						
Address			-			
City	State Zip Code					
First Name	Middle Name	Purpose of Expenditure	Amount of Expenditure			
Last Name/Business Name						
Address						
City	State Zip Code					
TOTAL ITEMIZED EXPENDITURES (Carry forward to item 3. of next page if additional pages (If this is the last page of expenditures, this amount mus)			\$ 802 13			